\* 08/05/2002 16:59 FAX



## MORRISON & FOERSTER # 7

PTO/SB/22 (10-day
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PETITION FOR EXTENSION OF		TIME UNDER 37 CFR 1.136(a)	Docket Number. (Opilonal) 393032009400	
	CERTIFICATE OF FACSIMILE TRANSMISSION	In re Application of Tomoyuki FUNAKI		
- 11	y certify that this correspondence is being	Application Number 09/371,760	Filed August 10, 1999	
- 11	e transmitted to the United States Patent and ark Office Fax # 703-872-9314 on August 5,	For DEVICE AND METHOD FOR ANALYZING SOUND SIGNAL FOR REPRESENTING THE SIGNAL IN MUSICAL NOTATION		
	Marsha K. Reynflds	Group Art Unit <b>2654</b>	Examiner D. Nolan	
This	is a request under the provisions of 37	CFR 1.136(a) to extend the period for filing	g a reply in the above identified application.	
The	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):			
	One month (37 CFR 1.17(a)(1))		\$	
	Two months (37 CFR 1.17(a)(	2))	<b>\$</b>	
	Three months (37 CFR 1.17(a)(3))		\$920.00	
	Four months (37 CFR 1.17(a)(4))		\$	
	Five months (37 CFR 1.17(a)	(5))	\$	
	Applicant claims small entity status. See 37 CFR 1.27.			
	A check in the amount of the fee			
	Payment by credit card. Form PTO-2038 is attached.			
L	_	peen authorized to charge fees in this a	•	
00 407 170		horized to charge any fees which may t Number 03-1952. A duplicate copy o	be required, or credit any of this form is attached for fee	
01 FC:11b:	overpayment, to Deposit Account to Deposit Account to Deposit Account the specific property of the property of	50		
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record.  attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a) 28.600.				
	dit card information should not authorization on PTO-2038.			
	August 5, 2002 Date		Signature Signature	
		David L. Fehrman Typed or printed name		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit mult forms if more than one signature is required, see below.				

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